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J. D. DUNSHEE, M.D., Director

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Community Sanitation in Imperial County

By WARREN F. FOX, M.D., County Health Officer

A program of community sanitation was recently inaugurated in Imperial County, California. This program deals essentially with the construction of a sanitary fly-proof type of privy in rural areas and also unsewered sections of incorporated cities. It is a SERA sanitation project, with supervision jointly under the United States Public Health Service, the State Department of Public Health and the local county health department.

By referring to the accompanying illustration, it will be noted that a radical departure has been made from the usual type erected. The important features are the concrete slab or floor and riser or bowl with a 4-inch vent from the bowl and a wooden cover for the bowl, 2 inches thick. The seat is automatically off center and is, therefore, self-closing. In addition, there are concrete footings on which the concrete slab rests. This, with a wooden curbing 5 feet deep by 3½ by 3½ feet square, makes for a tight and dark privy vault, which is the primary essential. The concrete construction also makes for greater ease in cleaning and as it is reinforced with iron, it is long lived. It is not too heavy to be easily moved by one man for short distances, and may quickly be moved by a trailer or truck or by dragging on the ground with a team of horses for longer distances.

The building is braced with 2 by 4 material, shiplap being used for siding and sheet iron material being used for the top. Two by three construction may be used if adequate bracing is afforded and likewise the top material may be of heavy roofing paper or other material. Siding may, likewise, be of lap-siding, flooring or 3-ply material. The building should be well painted and, if 3-ply wood is used, it should be well oiled or painted inside and out. The use of the latter material is experimental only and in wet climates and under rigorous conditions of use it is very questionable whether this material should be utilized. In general, the use of ship-lap or flooring for the siding is recommended.

It will be noted that ventila-

tion for the building is provided by open spaces below the roof. These openings are not screened, thus allowing flies which enter the building to leave. The door is not automatically closing as no door spring is used. Likewise, the door is several inches short to allow for circulation of air under the door when it is closed. Sanitarians have long realized that the primary essential for a privy vault is to have it dark and fly-proof. This has been accomplished through the use of the concrete slab and riser, making contents inaccessible to insects. It remains for the individual owner to determine whether or not he wishes to make the building itself fly-proof or mosquito-proof. An oval type of riser has been used, but some difficulty has been encountered in constructing a seat and cover which will stand hard usage. Except for looks, the rectangular type of construction is most satisfactory.

In order to put on a community sanitation program in the county, the health officer must first submit to the local SERA office a project for the construction of a certain number of privies. When this has been approved by the local county committee and the board of supervisors, it is sent to the State SERA office. Following its approval, SERA labor from the local relief rolls may be used in the construction of these privies, even on private property. In inaugurating the work in Imperial County, a district supervisor was assigned to the county temporarily and later a regional consultant from the United States Public Health Service temporarily supervised the program. These individuals are detailed to work directly with the county health officer in supervising the project. Forms are first secured and the Public Health Service allows a certain sum for the construction of these forms by local SERA carpenters. Arrangements are then made at central points for the pouring of the forms for the concrete slabs and risers. The 2-inch cover and seat may be constructed at this central point or elsewhere. It is generally the best procedure to have the concrete unit, which includes the slab, riser, cover, seat and vent, fabricated at a central place. Citizens may then arrange to purchase the unit from the lumber yard, concrete works or other central point. The cost of the building depends upon the type of construction used and whether any old salvaged lumber is used. Often the old privy building is only suitable for curbing in the privy vault and it is necessary for new materials to be used in the construction of the building. In some instances, lumber is sold from a central point or may be purchased from the individual lumber yard. The building may be fabricated at a central station, the sides being erected separately, then hauled to the ranch where it is to be erected. Under certain conditions it is possible to haul the entire building to the purchaser, but this raises the cost.

Application blanks for the construction of privies of this approved type must be signed before work is started. The supervisor or sanitary inspector checks on usable materials at the ranch and notifies the rancher of further materials needed and makes other necessary arrangements. After a sufficient number of applications have been received from a given locality, SERA laborers dig the pits and are followed by a crew of carpenters and laborers for construction of the buildings. In some instances it is possible for the county to provide transportation of the concrete units and, in other instances, it is necessary for the individual rancher to see that the unit and other needed materials are hauled to his ranch. Where a large number of privies are going to be erected in a small town, or other community, some way is found of hauling the fabricated sections of the building and the concrete units to the various homes. In rural areas where long distances must be covered, the problem is considerably greater.

The community sanitation program, sponsored by the United States Public Health Service, has been successfully carried on in 26 States throughout the country and some hundreds of thousands of this type of privy, featuring the concrete unit, have been constructed. There is no question in the minds of public health officials that this type of privy is a decided improvement over any other type previously constructed.

SEWER CONNECTIONS PREFERRED

In this issue of the Weekly Bulletin there appears an article by Dr. Warren F. Fox, Health Officer of Imperial County, in which an extensive plan of community sanitation is presented. This project in Imperial County is one which may be considered as forerunner to a more extensive project involving a much wider territory and under the supervision of the State Department of Public Health.

In the development of these projects for community sanitation, it must be understood that the use of sanitary privies is recommended only in those communities where sewage connections and water-flushed systems may not be available. There are still extensive rural areas in which the most simple methods of sewage disposal must necessarily be employed. In those sections of the State where there may be a shortage of water, it is not always possible to use water-flushed sewage disposal systems and the old dry earth method must be employed.

STANDARD FORMS FOR TUBERCULOSIS SANATORIA

For the first time it is now possible for tuberculosis sanatoria to keep uniform and complete records of all material facts about their patients available at all times for instant consultation. This important improvement in health bookkeeping is a result of two years' work done by a committee of the American Sanatorium Association, assisted in a secretarial capacity by members of the staff of the National Tuberculosis Association. Twenty-three new forms have been prepared.

Formerly it was often necessary, when information of a consecutive or cumulative nature was needed, to expend considerable time and effort to collect and arrange pertinent facts from records made at different times, and reposing in various forms which were kept primarily for other reasons than the one which might now be in mind. The new system has the added advantage in rendering available, as a matter of routine, facts which serve to satisfy statistical needs from a national viewpoint.

Some of the forms are merely improvements over existing ones; others make an original contribution. Among the latter are these pertaining respectively to (a) nose, throat, ear, eye and teeth; (b) pneumothorax; (c) operations; (d) tuberculous empyema; (e) statistical summary on discharge.

Forms are numbered and designated, as follows:

1. History—4 pages
1A. History
2. Examination
3. Nose, throat, ear, eye and teeth
4. Physician's orders
5. Nurse's record
6. Weight chart
7. Temperature, pulse and respiration
8. Laboratory examinations (sputum, etc.)
9. Laboratory examinations (blood, etc.)
10. X-ray
11. Reexamination
12. Pneumothorax
13. Exercise chart
14. Heliotherapy
15. Prescription for physiotherapy
16. Consultation
17. Operations
18. Tuberculous empyema
19. Permission for autopsy
20. Admissions—discharges
21. Statistical summary on discharge
22. Blank form (heading only)
23. File folder

The committee of the American Sanatorium Association which was appointed to prepare the forms comprised: Dr. Everett Morris of Auberry, California, chairman; Dr. H. A. Pattison, Dr. Ernest B. Emerson, Dr. F. Maurice McPhedran, Dr. Harry J. Corper, Dr. C. C. Browning, and Dr. Walter J. Marcley.

The secretarial work was done under the supervision of Jessamine S. Whitney, statistician of the National Tuberculosis Association.

FUNDAMENTALS

What other generation was ever confronted with such problems as we face! Numerous and difficult though they be, we are unwilling to wait for the slow process of time to deal with them. They must be solved without delay.

Nothing, then, but some form of learning in mature life can lead us out of our difficulties. Within a limited period of time men and women must equip themselves to understand the forces of society and so put themselves into a position to bring about improved conditions. But some one will ask: Can we not hand our problems over to talented and highly trained individuals? We need of course their service, but it is only out of widely diffused effort that persons of signal ability emerge.

The required methods of work are no secret; for they have been successfully employed by thinking individuals ever since the time of Socrates. In the domain of studies and investigation, reasoning and understanding, one can not build without first laying foundations. One can not, for example, be a radio expert without first laying hold on the principles of electricity. One can not be a business expert without first becoming familiar with the principles of economics. One can not be an engineer without first getting a knowledge of mathematics. So it runs throughout the cycle of subjects. Successful work along any line is a kind of development; before going far one must master its preliminary and prerequisite stages. There is no other valid way. One can not build a tower without first laying a solid foundation.

—*University of California Bulletin.*

"As a danger to the public health, as a peril to the family, and as a menace to the vitality, health and physical progress of the race, the venereal diseases are justly regarded as the greatest of modern plagues, and their prophylaxis the most pressing problem of preventive medicine that confronts us at the present day."—M. J. Rosenau.

Even in the populous districts, the practice of medicine is a lonely road which winds uphill all the way, and a man may easily go astray and never reach the delectable mountains unless he early finds those shepherd guides of whom Bunyan tells, Knowledge, Experience, Watchful and Sincere.—Osler.

MORBIDITY

Complete Reports for following Diseases for Week Ending November 3, 1934

Chickenpox

206 cases of chickenpox have been reported, as follows: Alameda County 5, Hayward 4, Oakland 14, San Leandro 14, Contra Costa County 2, Richmond 1, Fresno County 3, Eureka 13, Taft 1, Los Angeles County 2, Alhambra 1, Long Beach 19, Los Angeles 18, Pomona 3, Santa Monica 1, South Pasadena 1, Lynwood 2, South Gate 1, Madera County 2, Madera 1, Marin County 1, Ross 2, Merced 1, Orange County 1, Sacramento County 9, Sacramento 13, San Francisco 40, Lodi 1, Paso Robles 1, San Mateo 1, Santa Maria 2, Santa Clara County 6, Gilroy 9, San Jose 1, Vallejo 1, Tulare County 3, Porterville 1, Ventura County 5.

Diphtheria

56 cases of diphtheria have been reported, as follows: Alameda County 1, Oakland 3, Kern County 1, Los Angeles County 4, Compton 2, Los Angeles 27, Torrance 1, Lynwood 1, Monterey County 1, Orange County 3, Sacramento 1, San Bernardino County 1, San Diego County 1, El Cajon 1, San Francisco 2, Stockton 1, Santa Clara County 1, Santa Clara 1, Tulare County 1, Ventura County 2.

German Measles

8 cases of German measles have been reported, as follows: Alameda County 2, Berkeley 1, Eureka 1, Claremont 1, Fullerton 1, Coronado 1, San Diego 1.

Influenza

33 cases of influenza have been reported, as follows: Berkeley 1, Oakland 1, Kern County 1, Los Angeles County 1, Long Beach 2, Los Angeles 22, Whittier 1, South Gate 1, Orange County 1, San Francisco 2.

Malaria

8 cases of malaria have been reported, as follows: Kern County 1, San Joaquin County 2, Lodi 3, Modesto 1, Santa Paula 1.

Measles

212 cases of measles have been reported, as follows: Alameda 1, Calaveras County 1, Richmond 1, Eureka 1, Kern County 1, Alhambra 1, Claremont 1, Los Angeles 9, Madera County 1, Orange 1, San Diego 2, San Francisco 3, San Joaquin County 40, Stockton 3, Tracy 101, Lompoc 3, Santa Maria 26, Santa Cruz 7, Stanislaus County 1, Exeter 8.

Mumps

98 cases of mumps have been reported, as follows: Alameda County 2, Berkeley 1, Emeryville 5, Oakland 4, Contra Costa County 1, Fresno County 1, Los Angeles County 1, Glendale 1, Los Angeles 6, Pasadena 1, Madera County 2, San Rafael 1, Merced County 3, Sacramento County 4, San Bernardino County 4, Redlands 2, National City 1, San Diego 1, San Francisco 13, San Joaquin County 2, Lodi 14, San Luis Obispo County 1, San Mateo County 1, Santa Barbara County 16, Santa Maria 7, Gilroy 1, Modesto 1, Yolo County 1.

Pneumonia (Lobar)

68 cases of lobar pneumonia have been reported, as follows: Alameda County 2, Livermore 1, Oakland 1, Contra Costa County 1, Fresno County 1, Fresno 1, Orland 1, Fortuna 1, Kern County 2, Lassen County 1, Los Angeles County 4, Long Beach 1, Los Angeles 21, Pasadena 1, Whittier 1, Madera 1, Monterey County 2, Carmel 1, Napa County 1, Riverside County 1, Sacramento 2, San Bernardino County 1, San Bernardino 1, Upland 1, San Francisco 8, San Joaquin County 2, Stockton 1, San Mateo 1, Vallejo 1, Petaluma 1, Santa Rosa 1, Sonoma 1, Trinity County 1.

Scarlet Fever

193 cases of scarlet fever have been reported, as follows: Berkeley 1, Oakland 2, Colusa County 3, Contra Costa County 3, Richmond 1, El Dorado County 1, Fresno County 1, Fresno 2, Eureka 2, Imperial County 2, Holtville 2, Kern County 5, Taft 1, Los Angeles County 14, Alhambra 4, Arcadia 6, Beverly Hills 1, Compton 3, Huntington Park 1, La Verne 1, Long Beach 3, Los Angeles 33, Pasadena 2, Pomona 5, San Fernando 2, Whittier 1, Torrance 1, Lynwood 1, Hawthorne 1, South Gate 1, Monterey Park 4, Gardena 1, Orange County 2, Orange 4, Santa Ana 2, Laguna Beach 1, Placentia 2, Riverside County 1, Sacramento County 9, Sacramento 5, San Bernardino County 2, Ontario 1, San Diego County 2, Chula Vista 5, San Diego 3, San Francisco 12, San Joaquin County 6, Manteca 1, Stockton 2, San Luis Obispo County 1, Redwood City 1, Santa Barbara County 1, Santa Clara County 1, Palo Alto 1, San Jose 4, Santa Clara 1, Solano County 1, Suisun 2, Stanislaus County 1, Tuolumne County 3, Ventura County 4, Marysville 1.

Smallpox

No cases of smallpox have been reported.

Typhoid Fever

19 cases of typhoid fever have been reported, as follows: Fresno County 2, Imperial County 1, Los Angeles County 1, Long Beach 1, Torrance 1, Madera County 1, Merced County 1, Los Banos 1, San Bernardino County 4, San Francisco 1, Santa Maria 1, Vallejo 2, Santa Rosa 1, Tuolumne County 1.

Whooping Cough

76 cases of whooping cough have been reported, as follows: Berkeley 1, Oakland 1, Placerville 1, Los Angeles County 4, Azusa 1, Burbank 1, Los Angeles 4, Monrovia 1, Pasadena 2, Orange County 4, Huntington Beach 4, Orange 2, Riverside County 1, Sacramento 6, San Bernardino County 1, San Diego 5, San Francisco 21, San Joaquin County 1, Stockton 1, San Luis Obispo County 1, San Luis Obispo 2, Daly City 3, Lompoc 5, Santa Maria 2, Ventura County 1.

Meningitis (Epidemic)

2 cases of epidemic meningitis have been reported, as follows: Los Angeles 1, Porterville 1.

Dysentery (Amoebic)

5 cases of amoebic dysentery have been reported, as follows: Kings County 1, Beverly Hills 1, Marin County 1, San Francisco 1, Santa Barbara County 1.

Dysentery (Bacillary)

8 cases of bacillary dysentery have been reported, as follows: El Monte 1, Los Angeles 3, Monrovia 1, Modoc County 1, San Francisco 1, Trinity County 1.

Leprosy

One case of leprosy from Los Angeles County has been reported.

Pellagra

One case of pellagra from Santa Clara County has been reported.

Poliomyelitis

17 cases of poliomyelitis have been reported, as follows: Kern County 3, Los Angeles County 5, Inglewood 1, Los Angeles 4, San Fernando 1, Grass Valley 1, San Benito County 1, Red Bluff 1.

Tetanus

2 cases of tetanus have been reported, as follows: Kern County 1, Los Angeles 1.

Trachoma

4 cases of trachoma have been reported, as follows: Amador County 1, Los Angeles 1, San Diego County 2.

Paratyphoid Fever

One case of paratyphoid fever from Burbank has been reported.

Food Poisoning

8 cases of food poisoning from San Francisco have been reported.

Undulant Fever

2 cases of undulant fever have been reported, as follows: Glendale 1, Pasadena 1.

Coccidioidal Granuloma

One case of coccidioidal granuloma from Fresno County has been reported.

Septic Sore Throat (Epidemic)

3 cases of epidemic septic sore throat have been reported, as follows: Fresno County 1, South San Francisco 2.

Rabies (Animal)

13 cases of rabies in animals have been reported, as follows: Los Angeles County 2, Glendale 1, Inglewood 1, Los Angeles 2, San Diego 5, San Joaquin County 2.

It is better for a man to maintain himself in good health than to load himself with learning.—Arnold Bennett (1920).

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